



**KLS ELECTRONICS INC
1195 GREG STREET
SPARKS NV 89431**

Office: 775-412-3963 Fax: 775-826-6224 Email: kls@kls-usa.com

APPLICATION FOR OPEN ACCOUNT

COMPLETE ALL INFORMATION REQUESTED.

Company Name _____

Phone No. _____

Fax No _____

BILLING ADDRESS

SHIPPING ADDRESS

| | | |
|--|--|--|
| | | |
| | | |
| | | |

Ownership (Please Check One)

Corporation _____ Date Incorporated _____ Partnership _____ LLC _____ Sole Proprietorship _____

Date Business Started _____ Years at Above Physical _____

Federal I.D. Number _____ Resale Tax I.D. Number _____

Owners or primary corporate officers/stockholders

Legal Name/Title/S.S. #

Home Address

Home Telephone

| | | |
|--|--|--|
| | | |
| | | |
| | | |

PURCHASER INFORMATION

Name: _____

Phone: _____

Email: _____

Fax: _____

REFERENCES

Please include ACCOUNT number, current TELEPHONE and FAX numbers

1) Company: _____

2) Company: _____

Phone: _____

Fax: _____

Phone: _____

Fax: _____

3) Company: _____

4) Company: _____

Phone: _____

Fax: _____

Phone: _____

Fax: _____

Bank Reference

Phone: _____

Name of Contact _____ Fax: _____ Account # _____

NOTE: If you choose to use a preprinted sheet with trade and bank references listed, please submit it along with our signed credit application.

CREDIT TERMS:

10 Net 30. All past due invoices will be subject to late fees, the maximum allowable by law.

GENERAL AGREEMENT REGARDING ACCOUNT

As a duly authorized owner/officer of _____ I/we the undersigned warrant that the information herein given is correct and request that standard credit terms be extended by KLS ELECTRONICS INC, to our company based on this information. I/we authorize KLS ELECTRONICS INC to verify our credit background and further authorize our references to release information directly to KLS ELECTRONICS INC for such verification. The following terms are agreed to:

(A) **TERMS OF SALE:** Net amount due in 30 days with a monthly service charge of 1 ½% per month assessed on all accounts past 30 days after invoice date. Applicant agrees that the delivery invoice shall be the document relied on by both parties as the document setting this specific charge for each delivery, the applicable dates and the amounts thereof. Monthly statements, if any, are mailed for reconciliation purposes only. Applicant agrees that, should collection action be instituted against us, I/we agree to pay all costs thereof including for collection agency fees, reasonable attorneys fees, whether or not a lawsuit is actually brought to enforce collection, and court costs, if any.

I agree that if my account is not paid within terms agreed upon, KLS ELECTRONICS INC, to charge my credit card for the outstanding balance.

MasterCard

Visa

American Express

Card Number: _____

Cardholder: _____ Expiry date: _____ CIV: _____

Billing address: _____

Signature Title Date

(B) **TERMS OF DELIVERY AND ACCEPTANCE OF MATERIAL:** KLS ELECTRONICS INC is authorized to deliver and leave material at designated job sites, or to deliver material to individuals who indicate that they represent the applicant. Such deliveries are considered accepted by applicant as of the date of delivery with regard to satisfactory count and condition. Applicant further agrees to comply with and acknowledges receipt of the current terms and conditions of sales as established by KLS ELECTRONICS INC.

Signature Title Date

PERSONAL GUARANTEE

In consideration of granting credit to _____ I/we hereby personally and severally guarantee all purchases, promissory notes, and other forms of indebtedness as may presently exist, or may be incurred from time to time, by this company or person in favor of KLS ELECTRONICS INC, under the terms and conditions as stated above, exclusive of my official capacity in the above stated company. I/we further agree that if action is taken to enforce the terms of this guarantee, that KLS ELECTRONICS INC shall be entitled to recover a reasonable attorney's fee and court costs. I/we agree that proper venue of all legal proceedings is in Reno NV.

Date: _____ x _____
(Owner or primary corp. officer)

x _____
(Owner, or primary corp. officer)

x _____
(Spouse of above)

_____ (Spouse of above)

Please FAX TO: 775-826-6224 Thank you KLS ELECTRONICS INC.